

| | |
|---|---|
| CMS Manual System | Department of Health & Human Services (DHHS) |
| Pub 100-20 One-Time Notification | Centers for Medicare & Medicaid Services (CMS) |
| Transmittal 2163 | Date: October 26, 2018 |
| | Change Request 10946 |

SUBJECT: Shared System Enhancement 2018 ViPS Medicare Systems (VMS): Streamline the use of Assembler Language Code (ALC) Modules

I. SUMMARY OF CHANGES: This Change Request (CR) directs the Durable Medical Equipment (DME) Claims Processing System to eliminate certain obsolete logic and programs in the VMS SuperOp subsystem.

EFFECTIVE DATE: April 1, 2019

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: April 1, 2019

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

| R/N/D | CHAPTER / SECTION / SUBSECTION / TITLE |
|--------------|---|
| N/A | N/A |

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

One Time Notification

Attachment - One-Time Notification

| | | | |
|-------------|-------------------|------------------------|-----------------------|
| Pub. 100-20 | Transmittal: 2163 | Date: October 26, 2018 | Change Request: 10946 |
|-------------|-------------------|------------------------|-----------------------|

SUBJECT: Shared System Enhancement 2018 ViPS Medicare Systems (VMS): Streamline the use of Assembler Language Code (ALC) Modules

EFFECTIVE DATE: April 1, 2019

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: April 1, 2019

I. GENERAL INFORMATION

A. Background: The CMS is directing the VMS to eliminate obsolete logic, reports, screens, and ALC programs from the SuperOp subsystem. This change will simplify maintenance efforts in the future. The changes being made to VMS will be applicable to all processing that occurs following implementation of the changes. There will be no effective date logic included (e.g. date of service, date of receipt etc.) in these changes.

B. Policy: This CR does not involve any legislative or regulatory policies.

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

| Number | Requirement | Responsibility | | | | | | | | |
|---------|--|----------------|---|-----|------------|---------------------------|-----|-----|-----|-------|
| | | A/B MAC | | | DME MAC | Shared-System Maintainers | | | | Other |
| | | A | B | HHH | | FISS | MCS | VMS | CWF | |
| 10946.1 | The contractor shall eliminate a SuperOp screen, program, and several SuperOp reports that are no longer used and modify the processes for generating the remaining SuperOp reports so that they are generated using the standard VMS print program (VMSPRINT) as of the implementation date of this change request. | | | | | | | X | | |

III. PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility | | | | |
|--------|-------------|----------------|---|-----|------------|------|
| | | A/B MAC | | | DME MAC | CEDI |
| | | A | B | HHH | | |
| | None | | | | | |

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

| X-Ref Requirement Number | Recommendations or other supporting information: |
|--------------------------------|--|
|--------------------------------|--|

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Katie Bentz, 410-786-5084 or Katie.Bentz@CMS.HHS.GOV , Emma Battista, 410-786-0374 or Emma.Battista@CMS.HHS.GOV

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

ATTACHMENTS: 0